CITY OF LINCOLN POLICE DEPARTMENTFREEDOM OF INFORMATION ACT REQUEST

Return to 911 Pekin St, Lincoln, IL, 62656, email to: FOIA@lincolnil.gov, or fax to 217-732-4589

NAME:		DATE:	
ADDRESS:			
DAYTIME TELEPHONE NUMBER:			
E-MAIL:			
Please describe the information/records you are requesting in as much detail as possible. This will enable us to find the records quickly.			
Report Number:			
Location of Incident:			
Parties Involved:			
Description of Incident:			
I wish to: Inspect Only Receive Copies Only I agree to pay any and all applicable duplication fees listed in the fee schedule on page 2. (You will be notified by phone when the materials are available)			
Certification of Commercial/Non-Commercial Request "Commercial purpose" means the use of any part of a public record or records, or information derived from public records, in any form for sale, resale, or solicitation or advertisement for sales or services. It is a violation of the Freedom of Information Act for a person to knowingly obtain a public record for a commercial purpose without disclosing that it is for a commercial purpose. I hereby certify that my request is / is not for a commercial purpose.			
Signature of Requestor Date of Request			
OFFICE USE ONLY			
DATE RECEIVED	DATE DUE:	EXTENSION REQUESTED:	EXTENSION DATE:
COMPLY	PARTIALLY COMPLY	DENIED	FOIO INITIALS:
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FEE SCHEDULE FOR DUPLICATION OF PUBLIC RECORDS

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Size: 8½"x11" and/or Legal

• First 50 Pages: No Charge

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Accident Reports \$ 5.00

Photographs

• Digital Copies on Photo CD \$ 1.00

• Prints At Cost for Reproduction

<u>Digital Storage Devices</u> At Cost for Purchase

Please note that the requestor will be notified if any records they have requested needs to be sent out for reproduction/printing. The requestor will be charged at cost for said reproductions/printing jobs.